SPPRETARY DE THE SENATE

COVER SHEET FOR AMENDMENT OF 16 NOV -7 PM 5: 49 POST-TRAVEL SUBMISSION

Instructions: Use this form as a cover sheet for any paperwork you may need to submit to the Office of Public Records in order to make your Privately Sponsored Post-Travel Submission complete in accordance with Rule 35. Only complete this form if you need to submit an amendment to a post-travel filing you have already submitted.

SUBMIT DIRECTLY TO THE OFFICE OF PUBLIC RECORDS IN 232 HART BUILDING

Lee	
Employing Office/Committee:	
Heritage Foundation Private Sponsor(s) (List all):	
October 12-14, 2016	
Amended RE-2 Form; Description/Title of Attached Forms:	
	
	Post-travel submission is
Purpose of Amendment (describe the reason for amending original su incomplete. The RE-2 Form must be amended because it was	
Senator's signature and date) [.]	•
	

11/7/2016 (Date) House of Traveler)

Form RE-2

909600000000

(Revised 1/3/11)

Employee Post-Travel Disclosure of Travel Expenses

Post-Travel Filing Instructions: Complete this form within 30 days of returning from APY or THE SENATE travel. Submit all forms to the Open to the Ope 16 NOV -7 PM 5:49 travel. Submit all forms to the Office of Public Records in 232 Hart Building. In compliance with Rule 35.2(a) and (c), I make the following disclosures with respect to travel expenses that have been or will be reimbursed/paid for me. I also certify that I have attached: The original Employee Pre-Travel Authorization (Form RE-1), AND A copy of the Private Sponsor Travel Certification Form with all attachments (itinerary, invitee list, etc.) The Heritage Foundation Private Sponsor(s) (list all): 10/12/16 - 10/14/16 Travel date(s):_____ Name of accompanying family member (if any): _____ Relationship to Traveler: Spouse Child IF THE COST OF LODGING DID NOT INCREASE DUE TO THE ACCOMPANYING SPOUSE OR DEPENDENT CHILD, ONLY INCLUDE LODGING COSTS IN EMPLOYEE EXPENSES. (Attach additional pages if necessary.) Expenses for Employee: Other Expenses Meal Expenses **Lodging Expenses** Transportation (Amount & Description) Expenses \$118 \$8 - notebook \$196.56 \$76.05 ☐ Good Faith Estimate \$1 - pen Expenses for Accompanying Spouse or Dependent Child (if applicable): Other Expenses Meal Expenses **Lodging Expenses** Transportation (Amount & Description) Expenses ☐ Good Faith Estimate ☐ Actual Amount Provide a description of all meetings and events attended. See Senate Rule 35.2(c)(6). (Attach additional pages if necessary.): see attached agenda and ithheranx TO BE COMPLETED BY SUPERVISING MEMBER/OFFICER: I have made a determination that the expenses set out above in connections with travel described in the Employee Pre-Travel Authorization form, are necessary transportation, lodging, and related expenses as defined in Rule 35.

Date/Time Stamp:

Form RF.

Employee Post-Travel Disclosure of Travel Expenses

(Revised 1/3/11)

SECRETARY OF THE SENATE

Post-Travel Filing Instructions: Complete this form within 30 days of returning from 6 OCT 24 PM 4: 21 In compliance with Rule 35.2(a) and (c), I make the following disclosures with respect to travel expenses that have been or will be reimbursed/paid for me. I also certify that I have attached: The <u>original Employee Pre-Travel Authorization</u> (Form RE-1), <u>AND</u>

A <u>copy</u> of the *Private Sponsor Travel Certification Form* with all attachments (itinerary, invited list, etc.) The Heritage Foundation Private Sponsor(s) (list all): Travel date(s): 10/12/16 - 10/14/16 N/A Name of accompanying family member (if any): Relationship to Traveler: 🔲 Spouse 🥏 Child IF THE COST OF LODGING DID NOT INCREASE DUE TO THE ACCOMPANYING SPOUSE OR DEPENDENT CHILD, ONLY INCLUDE LODGING COSTS IN EMPLOYEE EXPENSES. (Attach additional pages if necessary.) Expenses for Employee: Transportation Other Expenses **Lodging Expenses** Menl Expenses (Amount & Description) Expenses \$76.05 \$196.56 \$118 \$8 - notebook Good Faith Estimate \$1 - pen 28 Actual Amount Expenses for Accompanying Spouse or Dependent Child (if applicable): Other Expenses Lodging Expenses Meal Expenses Transportation (Amount & Description) Expenses ☐ Good Faith Estimate ☐ Actual Amount Provide a description of all meetings and events attended. See Senate Rule 35.2(c)(6). (Attach additional pages if necessary.): <u> Zhase</u> CD (C) 10,71 CO (2) $\Theta(G)$ $\mathbf{O}(\mathfrak{O})$ **(3)** (3) **G)** 停下O BE COMPLETED BY SUPERVISING MEMBER/OFFICER: **CO** (3) have made a determination that the expenses set out above in connections with travel described in the Employee Pre-Travel (3) Muthorization form, are necessary transportation, lodging, and related expenses as defined in Rule 35. (Signature of Supervising Senator/Officer) (Date)